



U.S. Department
of Veterans Affairs

SARS-CoV-2 Testing Protocol for Veterans in VHA Homeless Programs: GPD and HCHV CRS

Memo Review and Expectations

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PURPOSE OF THE MEMO

- Homeless and formerly homeless Veterans are uniquely vulnerable to COVID-19
 - Living conditions, advanced average age, and high rate of chronic health problems
- [CDC research](#) indicates there can be high rates of asymptomatic carriers in congregate settings and once an individual tests positive the rate of actual infection among residents is much higher



PURPOSE OF THE MEMO

- The VA supports expansion of testing to Veterans who are asymptomatic and request testing per the VHA memo *COVID-19 Updated Guidance on Testing for Veterans and Employees* released May 14, 2020
- Therefore, this memo was developed to ensure that eligible Veterans in GPD and HCHV CRS programs receive viral testing to allow for early identification of COVID-19 cases and mitigate disease outbreaks in these congregate settings



PLANNING PRIOR TO TESTING

- GPD and HCHV sites are required to plan prior to any testing to ensure housing options have been identified to mitigate any gaps in housing and resources
 - Utilize *Options for Social Isolation Under the COVID-19 National Emergency: Guidance for GPD, HCHV CRS, and SSVF*
- Work closely with local and state health departments to ensure all non-eligible Veterans and frontline staff are also tested
 - GPD: Grantees are permitted to include in their per diem budget costs associated fees with acquiring COVID-19 testing for Veterans in the program



PLANNING PRIOR TO TESTING

- Processes should be in place at GPD and HCHV CRS sites for screening all persons entering the building including Veterans and frontline homeless program staff for fever and other COVID-19 symptoms according to facility screening protocols
- HCHV: No contract modifications are necessary to meet the requirements of the memo per the national contracting office



VIRAL TESTING AT ADMISSION

- Eligible Veterans newly admitted to GPD and HCHV CRS programs should be tested for SARS-CoV-2 by VHA unless other processes are in place (e.g. local health department testing)
- Conduct testing no more than 48 hours prior to admission unless Veteran has recovered from known SARS-CoV-2 infection and met CDC criteria for *Discontinuation of Isolation for Persons with COVID-19 Not in a Healthcare Setting*
 - Primarily follows CDC symptom-based criteria



INITIAL VIRAL TESTING

- Initial viral testing (i.e. baseline testing) should be conducted on Veterans already enrolled in GPD and HCHV CRS programs when there is substantial community transmission based on CDC criteria
 - Initial viral testing to avoid rapid spread of infection that could result in adverse effects for Veterans residing in congregate settings in communities with substantial transmission
- All VA medical centers (VAMC) should consider initial viral testing regardless of community transmission level when resources are available



CDC: COMMUNITY TRANSMISSION LEVELS

Level of Community Transmission	Community characteristics and description	Level of mitigation
Substantial, uncontrolled transmission	Large scale, uncontrolled community transmission, including communal settings (e.g., schools, workplaces)	Shelter in place
Substantial, controlled transmission	Large scale, controlled community transmission, including communal settings (e.g., schools, workplaces)	Significant mitigation
Minimal to moderate community transmission	Sustained transmission with high likelihood or confirmed exposure within communal settings and potential for rapid increase in cases	Moderate mitigation
No to minimal community transmission	Evidence of isolated cases or limited community transmission, case investigations underway; no evidence of exposure in large communal setting	Low mitigation



POSITIVE TEST RESULTS

- At admission
 - Do not limit entry into GPD and HCHV CRS programs based on positive or pending test results
 - Utilize *Options for Social Isolation Under the COVID-19 National Emergency: Guidance for GPD, HCHV CRS, and SSVF* and the [Discontinuation of Isolation for Persons with COVID-19 Not in a Healthcare Setting](#)
- Initial testing or new confirmed case at site
 - Testing all previously negative or untested Veterans should be repeated every week and continue weekly until no new cases are identified and **at least** 14 days have passed since most recent positive test at the site



VETERAN DECLINES TESTING

- Veteran declines testing without symptoms
 - Should not be placed in congregate setting
 - Quarantined for 14 days using the *Options for Social Isolation Under the COVID-19 National Emergency: Guidance for GPD, HCHV CRS, and SSVF*
- Veteran declines testing with symptoms
 - Should not be placed in congregate setting
 - Isolated until able to meet the CDC [symptom-based criteria](#) for discontinuation of isolation
 - At least 10 days have passed since symptom onset **and** at least 24 hours have passed since resolution of fever without the use of fever-reduction medications **and** other symptoms have improved



TESTING STRATEGY

- Every VAMC should develop a testing strategy to meet all testing needs described
- VAMC homeless program staff are responsible for documenting testing information in HOMES in addition to documenting in the electronic health record per VHA memo *COVID-19 Documentation in HOMES*, released May 13, 2020
 - Test results
 - Who administered the test
 - If Veteran placed in hotel/motel



TESTING RECOMMENDATIONS

- Utilizing homeless program staff in coordination with VA clinical staff (e.g. HPACT) to assist with notifying site staff, Veterans, and facilities of any positive test results/potential exposures
- Coordinate initial testing at GPD and HCHV CRS sites when possible where VAMC staff come to facilities to perform SARS-CoV-2 testing rather than transporting Veterans to the local VAMC to reduce the chance of disease transmission and increase access
- Consider initial testing events on weekends to enhance access to testing
- Consider repeat testing of all Veterans enrolled in GPD and HCHV CRS if resources and staffing capacity allow



EXPECTATIONS OF VA

- Testing eligible Veterans at admission
- Initial testing of Veterans already enrolled in programs in communities with substantial community transmission
- Follow-up testing when positive cases identified at sites through initial testing and new cases identified
- Provide the testing supplies and testing staff
- Documenting testing in electronic health record and HOMES



EXPECTATIONS OF GPD AND HCHV CRS SITES

- Proactive planning prior to testing
 - Ensure housing options for isolation and quarantine have been identified to mitigate any gaps in housing and related resources
 - Strongly encouraged to coordinate with local/state health departments or other health initiatives to ensure all non-eligible Veterans, non-Veteran residents, and frontline staff are also tested
 - Have processes in place for screening all persons entering the building
- Communicate with VA on testing needs and identification of positive cases



ADDITIONAL RESOURCES

CDC

Health department directory

<https://www.cdc.gov/publichealthgateway/healthdirectories/index.html>

Morbidity and Mortality Weekly Report

https://www.cdc.gov/mmwr/volumes/69/wr/mm6917e1.htm?s_cid=mm6917e1_w

Resources to support people experiencing homelessness

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/index.html>